Signature EL201.doc

Revised: Sep-05

PAGE | Date 4

119/06 Date

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Democratic Governors As	ssociation -	Nevada
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Name (print)

Office (if applicable)

District (if applicable)

## Contributions in Excess of \$100 or, When Added Together from One Contributor Exceeds \$100 Transfer Total Amount of All Campaign Contributions to Line 1 of Contributions Summary

CONTRIBUTOR'S NAME AND ADDRESS	DATE OF EACH CONTRIBUTION	AMOUNT OF EACH CONTRIBUTION	CHECK HERE If LOAN	Name and Address of 3 <sup>RD</sup> PARTY IF LOAN GUARANTEED BY 3 <sup>RD</sup> PARTY	NAME AND ADDRESS OF PERSON WHO FORGAVE THE LOAN, IF DIFFERENT THAN CONTRIBUTOR
L. Kimball & A	ssociates				
615 West Highl	and Ave				
Ebensburg, PA					
	10/28/05	\$5000.00			
				·	
		,			
		_			

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Name (print)

Office (if applicable)

District (if applicable)

## **Expense Categories**

CATEGORIES	CODE
Office expenses	A
Expenses related to volunteers	В
Expenses related to travel	С
Expenses relat∈d to advertising	D
Expenses related to paid staff	E
Expenses related to consultants	F
Expenses related to polling	G
Expenses related to special events	Н
** Goods and services provided in kind for which money would otherwise have been paid	ł
Other miscellaneous expenses	J

<sup>\*\*</sup> NRS 294A.362 requires "In Kind" contributions and expenses to be reported on a separate form, which is attached.

Report Period #

Democratic	COVERNORS	Association	_ N	ovada
Democratic	GOVELHOLS	ASSOCIALION	17	evada

Name (print)

Office (if applicable)

District (if applicable)

## Expenses in Excess of \$100 Transfer Total Amount of All Campaign Expenses to Line 8 of Expenses Summary

NAME AND ADDRESS OF PERSON, GROUP OR ORGANIZATION WHO RECEIVED THE PAYMENT FOR THE EXPENSE(S)	CATEGORY (See Previous Page) NRS 294A.365	DATE OF EACH EXPENSE	AMOUNT OF EACH EXPENSE
Nevada Democratic Part	У		
1325 E Vegas Valley Dr	ive <sub>J</sub>	10/28/05	\$5000.00
Las Vegas, NV 89109			

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